Testimony of Barbara Lucas

March 5, 2009

Dear Members of the House Committee on Great Lakes & Environment:

I would like to tell you about an experience which occurred in 2002, and which directly relates to the bill before you. My daughter was 15 years old at the time, and attended a boarding school. She had developed a case of severe itching on her legs. She had chronic eczema so scratching her legs was not uncommon for her, but this time it was not responding to the eczema cream and raw, open areas had developed. I called several dermatologists, but couldn't get an appointment for weeks, and didn't think it warranted an emergency room visit. So I advised her to go to the school infirmary. She called me later and said the doctor had diagnosed her with scabies, and gave her a bottle of Lindane to apply to herself in her room.

I had never heard of Lindane, so had no reason to question the medicine prescribed, but the diagnosis of scabies startled me, so I called the infirmary. The nurse assured me that they had had recent outbreaks of scabies in the school sports teams, so it wasn't surprising, and my daughter's rash had the telltale "tracks" of the scabies parasite—a sure sign.

A day or two later my daughter called home very distressed, saying the itching was worse and so she was going to reapply the lotion given to her. She also said she was going to give some to her close friend to apply, who was worried the scabies might spread from student to student.

Since the medicine wasn't working, I decided it was time to look into things more thoroughly. I went to the computer and typed "Lindane" in the search engine. I'll never forget my shock when the screen filled with dire warnings about the substance my daughter had been applying to herself—a medicine so problematic it has been banned or severely restricted in 53 countries, in some places for more than 30 years. SEIZURES and DEATH were listed as possible side effects, especially if misapplied, applied to open cuts, or if applied twice! I immediately picked up the phone to tell my daughter *absolutely not* to reapply it to herself, nor to give it to her friend, under any circumstances.

Luckily I reached her in time before she reapplied it. I shudder to think what might have happened, had I not stopped her. I learned on the internet that Lindane should not be applied to those under 110 pounds. My daughter was very thin (just about 110 at the time). And all those open sores on her legs might have hastened the absorption. It could easily have been a very bad outcome, all because of some itching on her legs.

I got assertive and managed to find a dermatology clinic that would see my daughter first thing the next morning. This doctor diagnosed her with folliculitis, which is an infection of the hair follicles. He said she probably got it from scratching her eczema, in combination with shaving her legs. The doctor prescribed an antibiotic and it cleared up promptly.

Obviously, the first mistake was the misdiagnosis. But even assuming she had been correctly diagnosed with scabies:

1. No other "first-line" treatment was tried first.

- 2. She was under-weight.
- 3. She had open sores.
- 4. She was instructed to apply it on her own, without supervision.
- 5. Neither she nor her parents were told: "Do NOT reapply. Do NOT share with others."
- 6. Neither she nor her parents were advised of the potential side-effects.

We feel very lucky that our daughter showed no negative reactions to the Lindane, at least not outwardly. But if I had not taken it upon myself to do research on Lindane, had I not had access to the internet that morning, I would not have stopped her from applying it a second time. This really scares me to think about.

This is not a case where a child was seen by an inexperienced doctor, or who had parents who due to lack of education, or language differences, or whatever, did not follow the doctor's instructions. We are attentive parents, my husband is a physician, and we had a reputable medical service caring for our daughter. I suspect these types of errors could and will happen many more times to others, possibly with very serious consequences, unless action is taken to prevent them. We can't just assume that doctors and patients will do the right thing with a substance like Lindane.

Due to my daughter's situation, as well as personal experience with lice as a child, I know there is a lot of hysteria and angst that comes with a diagnosis of contagious parasites. People will do anything to get rid of it ASAP—e.g. applying twice if once didn't do the trick. At the very minimum doctors should receive special training and certification in the diagnosis and treatment of lice and scabies, and the drug should only be applied by a doctor certified to do so, in their office. But personally I question whether keeping Lindane on the market is worth the effort and expense to society which would be required to make sure it is applied correctly and safely, when other countries and states appear to be doing fine without it.

In addition to the dangers to human health, there is the very serious issue of its damage to the environment. Neither my daughter nor I were informed not to pour the leftovers down the drain. We had no idea until I started researching it that once in our waterways, lindane bioaccumulates in the food chain and has been found in the fat of animals as far away as the Artic regions. Even if users are good enough to take leftovers to a home toxics drop-off instead of pour them down the drain, there is the fact that most of the drug is going down the shower drain anyway, after application.

If a ban is not possible at this time, I hope you at least severely restrict its use and allocate sufficient funds to ensure that doctors are thoroughly educated in its use, and that the restrictions are properly enforced.

I cannot attend your hearing today, but wanted to submit this testimony via letter. Thank-you for listening to my concerns. Sincerely,

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